APPLICATION FOR UNITED STATES PATENT Declaration and Power of Attorney

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

1	MIS E	BATHING	AID								
DEL OF	descriped and cl	aimed in the	specification:								
ENT &	14.	☐ attached l									
	b.	☐ filed on _		as Applic	ation Serial No.		and amended o				
	(if applicable) I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § I .56(a). Under Title 35, U.S. Code § 119, the priority benefits of the										
	following foreign application(s) filed within one year prior to this application are hereby claimed:										
	Japanese Patent Application No. 2002-244662 filed August 26, 2002										
		ca either (a)	_					s foreign to the United e above-named foreign			
2	If there are no c insert "NONE"		applications,		NONE						
	I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:										
	James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg: No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411 and Edward P. Walker, Reg. No. 31,450. ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.										
	I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of mown knowledge are true and that all statements made on information and belief are believed to be true; and further that thes statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, of both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
3	Typewritten Ful of Sole or First		Masa	ru			NO!	RO			
			Given N	ame	Mic	idle Initial	Famil	ly Name			
**4	Inventor's Signa	ture	→ <u> </u>	asaru	Noro						
**5	Date of Signatur	re ·	\rightarrow	8	5	2003					
3	Date of Signatu		•	Month	~~~ ,	Day		Year			
6	Residence	Morio	uchi-shi	۹	aka	•	JAPAN				
J	Residence Moriguchi-shi City			-	or Province		Country				
7	Citizenship	Japai	nese								
8	Poet	Office Addre	•99	c/o San	vo Electric	Co Ltd 5	-5. Keihanhon	dori 2-chome,			
U	(Inse	ert complete ma	iiling		-						
		ess, including o	country)	Morialia	าท-รทเ ()ระ	<u>aka 570-867</u>	7. JAPAN				

address, including country)

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5. IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE 🗵

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

3	Typewritten Full Name of	Masafumi		NISHINO				
	Second Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
*4	Inventor's Signature →	Masafumi		Nishino				
*5	Date of Signature →	8	5	2003				
	Suite of Signature	Month	Day	Year				
*6	Residence Moriguchi-shi	Osaka	L	JAPAN_				
	City	State or Province		Country				
*7	Citizenship <u>Japanese</u>							
8	Post Office Address (Insert complete mailing	c/o Sanyo Electric Co., Ltd., 5-5, Keihanhondori 2-chome,						
	address, including country)	Moriguchi-shi, Osaka 570-8677, JAPAN						
2	Typogritton Full Name of	Tetsunari		HAMADA				
3	Typewritten Full Name of Third Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
	()			1				
*4	Inventor's Signature →	Tetsunari		Hamada				
* 5	Date of Signature ->	8	7	2003				
	2 and or organization	Month	Day	Year				
*6	Residence Moriguchi-shi	Osaka	<u> </u>	JAPAN				
	City	State or P	Province .	Country				
*7	Citizenship <u>Japanese</u>							
8	(1	c/o Sanyo Electric Co., Ltd., 5-5, Keihanhondori 2-chome,						
	address, including country)	Moriguchi-shi, Osaka 570-8677, JAPAN						
2	Typewritten Full Name of							
3	Fourth Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
	` ,			•				
*4	Inventor's Signature →							
* 5	Date of Signature>							
	J	Month	Day	Year				
*6	ResidenceCity							
		State or P	Province	Country				
*7	Citizenship							
8	Post Office Address (Insert complete mailing							
	address, including country)							
3	Typewritten Full Name of							
,	Fifth Joint Inventor (if any)	Given Name	Middle Initial	Family Name				
	~ ~/			•				
*4	Inventor's Signature →							
* 5	Date of Signature →							
		Month	Day	Year				
* 6	Residence							
	City	State or F	Province	Country				
* 7	Citizenship							
8	Post Office Address (Insert complete mailing							
	address, including country)			1,				

^{*}Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5. This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.